

**COUNTY OF SAN DIEGO
VOLUNTEER REPORT FORM
PERIOD: JULY 1, 2003 - JUNE 30, 2004**

COUNTY OF SAN DIEGO
BOARD OF SUPERVISORS

2004 JUL 14 PM 4:09

THOMAS J PASTUSZKA
CLERK OF THE BOARD
OF SUPERVISORS

1. DEPARTMENT/COURT INFORMATION:

Department/Court: Health and Human Services Agency

Division/Unit: South Region Public Health Center

2. VOLUNTEER PROGRAM BENEFITS:

- a. GENERAL VOLUNTEERS (this section should include community volunteer, student intern, groups, corporations, etc.)

No. Vol.	6	Hours	785	X	\$17.19	=	\$13,494.15
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Types of work performed by GENERAL VOLUNTEERS in this category:

Clerical suport for clinics; customer service, screen calls,data entry, filing, Windows 95 and Excel projects.

- b. INSTITUTIONAL VOLUNTEERS (this section should include court referrals, honor camp inmates, PIC/RETC, GAIN, etc.)

No. Vol.	0	Hours	0	X	\$17.19	=	\$0.00
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Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

- c. SPECIALIZED VOLUNTEERS (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity). These specialized positions have verifiable compensation levels [VCL]. If you have such a volunteer, please indicate the position, hours and compensation level below.)

Position	Hours	X	VCL	=	Dollar Benefit
1	144		\$54.00		\$7,776.00
					\$0.00

No. Vol.	0	Total Hours	144	Total Value	\$7,776.00
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Types of work performed by SPECIALIZED VOLUNTEERS in this category:

Medical assessment screening for children 0-09 years of age.

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

<u>No. of Volunteers</u>	<u>Hours</u>	<u>Dollar Benefit</u>
<u>6</u>	<u>785</u>	<u>\$13,494</u>
<u>0</u>	<u>0</u>	<u>\$0</u>
<u>1</u>	<u>144</u>	<u>\$7,776</u>

TOTALS:	7	Total Hours	929	Total Value	\$21,270.15
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3. DONATIONS TO VOLUNTEER PROGRAM:

Please list all donations to the department's Volunteer Program including monetary donations and tangible/intangible items. Items such as computers, air time, transportation, books, etc. Please assign a fair market value to each and add to the total value of the donations section.

Item Donated: cash Value: \$55.50

Item Donated: gift Value: \$50.00

Item Donated: Agency recognition gift Value: \$10.00

Item Donated: _____ Value: _____

TOTAL VALUE = \$115.50

4. VOLUNTEER PROGRAM COSTS:

a.

Cost of direct supervision of Volunteers (total hours of direct supervision multiplied by the hourly rate of staff person[s] directly supervising program volunteers.)

Hours 755.5 X Rate \$15.82

\$11,952.01

b. Cost of program coordination (total hours of program coordination multiplied the hourly rate of coordinator[s]). This section should include coordination of staff, compiling statistics, job description preparation, volunteer placement, recognition, etc.)

Hours X Rate

\$0.00

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c. Other program costs (training materials/supplies, recognition costs, etc.):

Item : _____ Cost: _____

Item : _____ Cost: _____

Item : _____ Cost: _____

TOTAL OF OTHER PROGRAM COSTS =

\$0.00

d. TOTAL OF PROGRAM COST (4a+4b+4c) =

\$11,952.01

5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

a Total Dollar Benefits of Volunteers, Item 2d \$21,270.15

b. Total of Donations to Volunteer Program, Item 3 \$115.50

c. Subtract Total of program Costs, Item 4d \$11,952.01

TOTAL PROGRAM BENEFIT:

\$9,433.64

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6. **RECRUITING:**

Please describe your recruiting programs:

Word of mouth, Community Southwestern College.

7. **SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:**

Please describe any special activities and/or achievements your program was involved in during the period of this report:

8. **VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2004-05:**

Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

SRPHC will continue to offer the Volunteer Program to help community members obtain desirable work experience as it benefits the individual and the County.

We hope to qualify an average of 6 volunteers per year. We will continue to maintain collaborative efforts with the community.

9. **GENERAL INFORMATION:**

Name of person completing report:

Angelica Pimentel, Senior Clerk

Phone:

619 409-3474

Mail Stop: S518

E-Mail:

Angelica.Pimentel@sdcounty

Volunteer Coordinator:

Angelica Pimentel, Senior Clerk

Phone:

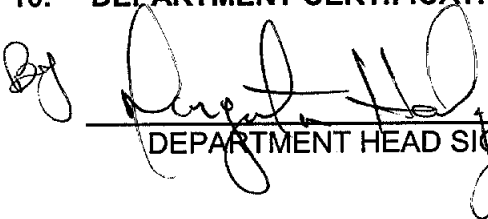
619 409-3474

Mail Stop: S518

E-Mail:

Angelica.Pimentel@sdcounty

10. **DEPARTMENT CERTIFICATION:**

By 
DEPARTMENT HEAD SIGNATURE

6/25/04
DATE

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